

STATEMENT OF ECONOMIC INTERESTS

Date Received
Official Use Only

FAIR POLITICAL
PRACTICES COMMISSION
COVER PAGE

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MODESTO CITY CLERK

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Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)
RIDENOUR JAMES E.

1. Office, Agency, or Court

Agency Name

MODESTO CITY COUNCIL

Division, Board, Department, District, if applicable

Your Position

MAYOR

► If filing for multiple positions, list below or on an attachment.

Agency: SEE ATTACHED LIST OF DESIGNATED POSITIONS

Position: _____

2. Jurisdiction of Office (Check at least one box)

☐ State

☐ Judge (Statewide Jurisdiction)

☐ Multi-County _____

☒ County of Stanislaus

☒ City of Modesto

☐ Other _____

3. Type of Statement (Check at least one box)

☒ Annual: The period covered is January 1, 2010, through December 31, 2010.

☐ Leaving Office: Date Left ____/____/____
(Check one)

-or-
The period covered is ____/____/____, through December 31, 2010.

☐ The period covered is January 1, 2010, through the date of leaving office.

☐ Assuming Office: Date ____/____/____

☐ The period covered is ____/____/____, through the date of leaving office.

☐ Candidate: Election Year _____ Office sought, if different than Part 1: _____

4. Schedule Summary

Check applicable schedules or "None."

► Total number of pages including this cover page: 4

☐ Schedule A-1 - Investments - schedule attached

☐ Schedule C - Income, Loans, & Business Positions - schedule attached

☐ Schedule A-2 - Investments - schedule attached

☒ Schedule D - Income - Gifts - schedule attached

☐ Schedule B - Real Property - schedule attached

☒ Schedule E - Income - Gifts - Travel Payments - schedule attached

-or-

☐ None - No reportable interests on any schedule

5. Verification

I certify under penalty of perjury under the laws of the State of California that

Date Signed 4/1/2011
(month, day, year)

Signature

SCHEDULE D Income – Gifts

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Name JAMES E. RIDENOUR

<p>▶ NAME OF SOURCE</p> <p>AT&T INC. AND ITS AFFILIATES</p> <p>ADDRESS (Business Address Acceptable)</p> <p>400 CAPITAL MALL ST 1700 SACRAMENTO 95814</p> <p>BUSINESS ACTIVITY, IF ANY, OF SOURCE</p> <p>COMMUNICATIONS</p> <table border="1"> <thead> <tr> <th>DATE (mm/dd/yy)</th> <th>VALUE</th> <th>DESCRIPTION OF GIFT(S)</th> </tr> </thead> <tbody> <tr> <td>9 / 11 / 10</td> <td>\$ 100.00</td> <td>TICKETS</td> </tr> <tr> <td> / / </td> <td>\$</td> <td> </td> </tr> <tr> <td> / / </td> <td>\$</td> <td> </td> </tr> </tbody> </table>	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)	9 / 11 / 10	\$ 100.00	TICKETS	/ /	\$		/ /	\$		<p>▶ NAME OF SOURCE</p> <p> </p> <p>ADDRESS (Business Address Acceptable)</p> <p> </p> <p>BUSINESS ACTIVITY, IF ANY, OF SOURCE</p> <p> </p> <table border="1"> <thead> <tr> <th>DATE (mm/dd/yy)</th> <th>VALUE</th> <th>DESCRIPTION OF GIFT(S)</th> </tr> </thead> <tbody> <tr> <td> / / </td> <td>\$</td> <td> </td> </tr> <tr> <td> / / </td> <td>\$</td> <td> </td> </tr> <tr> <td> / / </td> <td>\$</td> <td> </td> </tr> </tbody> </table>	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)	/ /	\$		/ /	\$		/ /	\$	
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Comments: _____

SCHEDULE E
Income – Gifts
Travel Payments, Advances,
and Reimbursements

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Name <u>JAMES E. RIDENOUR</u>

- Reminder – you must mark the gift or income box.
- You are not required to report income from government agencies.
- You may mark the box 501(c)(3) for a travel payment received from a nonprofit 501(c)(3) organization. When the payment is a gift it is reportable but is not subject to the \$420 gift limit.

<p>▶ NAME OF SOURCE <u>LEAGUE OF CALIFORNIA CITIES</u></p> <p>ADDRESS (Business Address Acceptable) <u>1400 K STREET</u></p> <p>CITY AND STATE <u>SACRAMENTO, CA 95814</u></p> <p>BUSINESS ACTIVITY, IF ANY, OF SOURCE <input type="checkbox"/> 501 (c)(3) <u>ADVOCACY FOR CITIES AND THIER RESIDENTS</u></p> <p>DATE(S): <u>1 / 01 / 10</u> - <u>12 / 31 / 10</u> AMT: \$ <u>7688.26</u> (If applicable)</p> <p>TYPE OF PAYMENT: (must check one) <input type="checkbox"/> Gift <input checked="" type="checkbox"/> Income</p> <p>DESCRIPTION: <u>TRAVEL, MEALS AND LODING FOR</u> <u>VOLUNTEER SERVICES AS A MEMBER OF THE</u> <u>LEAGUE OF BOARD OF DIRECTORS</u></p>	<p>▶ NAME OF SOURCE</p> <p>ADDRESS (Business Address Acceptable)</p> <p>CITY AND STATE</p> <p>BUSINESS ACTIVITY, IF ANY, OF SOURCE <input type="checkbox"/> 501 (c)(3)</p> <p>DATE(S): ____/____/____ - ____/____/____ AMT: \$ ____ (If applicable)</p> <p>TYPE OF PAYMENT: (must check one) <input type="checkbox"/> Gift <input type="checkbox"/> Income</p> <p>DESCRIPTION: _____</p>
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Comments: _____

Modesto City Council
Requires Statement of Economic Interest Filing

- Citizens Housing and Community Development Committee
c/o City Clerk, City of Modesto
- Tenth Street Place Joint Powers Agency
c/o Clerk of the Board, Stanislaus County
- 911 Emergency Dispatch JPA Committee
c/o Clerk of the Board, Stanislaus County
- StanCOG Policy Board
c/o Mr. Vince Harris
StanCOG
900 H Street, Ste. D, Modesto, CA 95354
- Alliance Board
c/o Clerk of the Board, Stanislaus County
- Waste to Energy Financing Agency
c/o Clerk of the Board, Stanislaus County
- California Emergency Services Council
c/o Fair Political Practices Commission
Copy to: Headquarters Personnel Office
Attn: Terry Anderson
3650 Schriever Avenue, Mather, CA 95655
- North County Corridor Transportation Expressway JPA
c/o Clerk of the Board, Stanislaus County